## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the Secretary

#### **Findings of Scientific Misconduct**

**AGENCY:** Office of the Secretary, HHS. **ACTION:** Notice.

**SUMMARY:** Notice is hereby given that the Office of Research Integrity (ORI) has made a final finding of scientific misconduct in the following case:

David N. Shapiro, M.D., Št. Jude Children's Research Hospital: Based upon a report from St. Jude Children's Research Hospital as well as information obtained by the Office of Research Integrity (ORI) during its oversight review, ORI found that Dr. Shapiro, former faculty member, St. Jude Children's Research Hospital, engaged in scientific misconduct by falsifying the authorship of five publications listed in his biographical sketches in several National Institutes of Health (NIH) grant applications, including applications submitted to the National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS), the National Institute of General Medical Sciences (NIGMS), the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), and the National Cancer Institute (NCI).

Specifically, Dr. Shapiro listed himself as an author when he was not. Dr. Shapiro also fabricated data for Figures 5 and 7 in the following publication: Sublett, J.E., Jeon, I.S., & Shapiro, D.N. "The aveolar rhabdomyosarcoma *PAX3/FKHR* fusion protein is a transcriptional activator." *Oncogene* 11:545–552, 1995. Dr. Shapiro has submitted a letter to *Oncogene* requesting retraction of these figures.

Dr. Shapiro has accepted the ORI finding and has entered into a Voluntary Exclusion Agreement with ORI in which

he has voluntarily agreed:

(1) To exclude himself from serving in any advisory capacity to the Public Health Service (PHS), including but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as a consultant for a period of three (3) years, beginning on July 29, 1997;

(2) To exclude himself from any contracting or subcontracting with any agency of the United States Government and from eligibility for, or involvement in, nonprocurement transactions (e.g., grants and cooperative agreements) of the United States Government as defined in 45 CFR part 76 (Debarment Regulations) for a period of two (2) years, beginning on July 29, 1997;

(3) That any institution that submits an application for PHS support for a research project on which Dr. Shapiro's participation is proposed or that uses him in any capacity on PHS supported research must concurrently submit a plan for supervision of his duties to the funding agency for approval for a period of one (1) year following the two (2) year exclusion. The supervisory plan must be designed to ensure the scientific integrity of Dr. Shapiro's research contribution. The institution also must submit a copy of the supervisory plan to ORI.

### FOR FURTHER INFORMATION CONTACT:

Acting Director, Division of Research Investigations, Office of Research Integrity, 5515 Security Lane, Suite 700, Rockville, MD 20852, (301) 443–5330.

Chris B. Pascal,

Acting Director, Office of Research Integrity. [FR Doc. 97–20816 Filed 8–6–97; 8:45 am] BILLING CODE 4160–17–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Agency for Toxic Substances and Disease Registry

### **Notice of Meeting**

The Agency for Toxic Substances and Disease Registry announces the following meeting.

Name: Expert Workshop Regarding Medical Monitoring in Bunker Hill, Idaho. Times and Dates: 8:30 a.m.-5 p.m., August 19, 1997. 8:30 a.m.-5 p.m., August 20, 1997.

Place: Kellogg Middle School Library, 800 Bunker Avenue, Kellogg, Idaho 83837, telephone 208/784–1348.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 100 people.

Purpose: Target population(s) of residents and workers in and surrounding the former Bunker Hill lead and zinc smelting facility in Idaho have received past exposures to lead (and possibly other heavy metals).

The exposures have decreased markedly, but studies show adverse health outcomes in these populations, most probably as a result of the past exposures. The literature supports an association between known adverse health outcomes and lead exposure.

ATSDR wants to determine if there is a definable population at significantly increased risk of disease who may benefit from a medical monitoring program. ATSDR will judge the appropriateness of such a program by applying its medical monitoring criteria. If a program is deemed appropriate, the agency will develop a medical monitoring plan for the target population(s). ATSDR is planning three workshops consisting of external experts to provide individual input and guidance about applying the medical monitoring criteria to Bunker Hill. This announcement is for the

first workshop; all three workshops will be open to the public.

Matters To Be Considered: The objective of the first workshop is to use all available information from ATSDR and other relevant data to make individual recommendations and answer questions related to the application of the first four ATSDR medical monitoring criteria at Bunker Hill, definition of the target populations, and specific outcomes as candidates for monitoring. Community and local health representatives and nationally recognized lead experts will convene to consider the first four ATSDR Medical Monitoring Criteria as they apply to Bunker Hill.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Vivian Rush, M.D., Medical Officer, ATSDR-Division of Health Education and Promotion, 1600 Clifton Road, NE, M/S E–33, Atlanta, Georgia 30333; telephone 404/639–5080.

Dated: August 1, 1997.

#### Carolyn J. Russell,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 97–20785 Filed 8–6–97; 8:45 am] BILLING CODE 4163–70–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Agency for Toxic Substances and Disease Registry

[ATSDR-123]

ATSDR's Interim Policy Guideline and Technical Support Document on Dioxin and Dioxin-Like Compounds in Soil

**AGENCY:** Agency for Toxic Substances and Disease Registry (ATSDR), Department of Health and Human Services (HHS).

**ACTION:** Notice of availability.

**SUMMARY:** This notice announces the availability of ATSDR's "Interim Policy Guideline: Dioxin and Dioxin-Like Compounds in Soil," and the "Technical Support Document for ATSDR Interim Policy Guideline: Dioxin and Dioxin-Like Compounds in Soil." ATSDR has adopted this interim policy guideline to assess the public health implications of dioxin and dioxin-like compounds in residential soils near or on hazardous waste sites. These compounds include 2,3,7,8tetrachlorodibenzo-p-dioxin (TCDD), related chlorinated dibenzo-p-dioxins (CDDs), chlorinated dibenzofurans (CDFs), and other structurally related groups of chemicals from the family of halogenated aromatic hydrocarbons.